PTOSB322 (07-39)
Approved for use through 07/31/2012 (08-00)
U.S. Patent and Trademark Office, U.S. DEPARILENT OF COMMERCE
Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless of stadys a valid Office control number

PETITION FOR EXTENSION OF TIME U	Docket Number (Option	Docket Number (Optional)		
FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		13564-105030		
Application Number 10/562,261		Filed July 6, 2006	Filed July 6, 2006	
For Vaccines Against Group Y Neisser	a Meningitidis and Mening	ococcal Combination	ns Thereof	
Art Unit 1645		Examiner Nina Archie		
This is a request under the provisions of 37 Capplication.				
The requested extension and fee are as follow	vs (check time period desired		ate fee below):	
	Fee	Small Entity Fee		
One month (37 CFR 1.17(a)(1))	\$130	\$65	\$	
Two months (37 CFR 1.17(a)(2)	\$490	\$245	\$	
Three months (37 CFR 1.17(a)(3)) \$1110	\$555	\$	
Four months (37 CFR 1.17(a)(4)) \$1730	\$865	\$	
Five months (37 CFR 1.17(a)(5)	\$2350	\$1175	\$ <u>2350</u>	
Applicant claims small entity status. See	37 CFR 1.27.			
A check in the amount of the fee is en	nclosed.			
Payment by credit card. Form PTO-2	038 is attached.			
The Director has already been author	rized to charge fees in this	application to a Dep	osit Account.	
▼ The Director is hereby authorized to a Deposit Account Number 50-3732	charge any fees which may	be required, or cred	dit any overpayment, to	
WARNING: Information on this form may be Provide credit card information and authori	ecome public. Credit card infore zation on PTO-2038.	mation should not be in-	cluded on this form.	
I am the applicant/inventor.				
assignee of record of the Statement under 37	ne entire interest. See 37 C CFR 3.73(b) is enclosed (FR 3.71. Form PTO/SB/96).		
attorney or agent of red	cord. Registration Number	33,285		
attorney or agent unde	r 37 CFR 1.34. ting under 37 CFR 1.34			
Memos All mentes		March 4, 201	March 4, 2010	
Signature			Date	
Kenneth H. Sonnenfeld		(212) 556-2324		
Typed or printed name		Telephone Number		
NOTE. Signatures of all the inventors or assignees of reco- signature is required, see below.	rd of the entire interest or their represe	entative(s) are required. Subm	nit multiple forms if more than one	
☐ Total of	forms are submitted.			

This collection of information is required by 37 CPR 1.13(6). The information is required to obtain of ritidal is defined by the public since is to the limit by the Public since is the Public si FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.